

Flathead County

Planning & Zoning

40 11th Street West, Suite 220 Kalispell, MT 59901 Telephone 406.751.8200 Fax 406.751.8210

FEB 0 9 2022 Flathead County Planning and County Planning and Zoning Office

PETITION FOR ZONING AMENDMENT

Submit this application, all required information, and appropriate fee (see current fee schedule) to the Planning & Zoning office at the address listed above.

	FEE ATTACHED \$ 1580				
APPLICANT/OWNER: Jane K. O'Hara and Douglas H. Parker and Karen Parker Wandel and Luke	406 450 3550				
P. Hansen and Patrick H. Maloney and Kirsten Kay Svennungsen 1. Name: Phone:	406-450-3550				
2. Mail Address: PO Box 175					
3. City/State/Zip: Kevin, MT 59454					
4. Interest in property: FEE					
Check which applies: Map Amendment X Text Amendment:					
TECHNICAL/PROFESSIONAL PARTICIPANTS:					
Name: Phone:	261-7758				
Mailing Address:2302 Hwy 2 E #6					
City, State, Zip: Kalispell, MT 59901	Control of the Contro				
Email:rbreck77@yahoo.com					
IF THE REQUEST PERTAINS TO AN AMENDMENT TO THE TEXT OF THE ZONING REGULATIONS, PLEASE COMPLETE THE FOLLOWING:					
A. What is the proposed zoning text/map amendment	?				
IF THE REQUEST PERTAINS TO AN AMENDMENT TO THE ZONING MAP PLEASE COMPLETE THE FOLLOWING:					
A. Address of the property: 489 River Bend Drive We	st Glacier, MT 59936				
B. Legal Description: Lot 1, Kalbfleisch-Parker Sub					
(Lot/Block of Subdivision	or Tract #)				
35 _ 32N _ 19W					
Section Township Range (Attach sheet for metes a	nd bounds)				
C. Total acreage: 8					
D. Zoning District: CALURS / Middle Canyon					
E. The <u>present</u> zoning of the above property is: Neigh	iborhood				
F. The <u>proposed</u> zoning of the above property is: R-1					
G. State the changed or changing conditions that make					
necessary: The neighborhood plan is not adequate to addre	ess the best use of the proposed				
development of the property. This application requests the adoption of a n	ew zoning district to facilitate the needs of				

EVII ACH	CRITI	WING ARE THE CRITERIA BY WHICH ZONING AMENDMENTS ARE PLEASE PROVIDE A RESPONSE AND DETAILED EXPLANATION FOR ERION FOR CONSIDERATION BY THE PLANNING STAFF, PLANNING COMMISSIONERS.
1.	Is the	proposed amendment in accordance with the Growth
	Policy	/Neighborhood Plan?
2.	Is the	proposed amendment designed to:
	a.	Secure safety from fire and other dangers?
	b.	Promote public health, public safety and the general welfare?
	c.	Facilitate the adequate provision of transportation, water, sewerage,
		schools, parks and other public requirements?
3.	Does	the proposed amendment consider:
	a.	The reasonable provision of adequate light and air?
	b.	The effect on motorized and non-motorized transportation systems?
	c.	Compatible urban growth in the vicinity of cities and towns that at a
		minimum must include the areas around municipalities?
	d.	The character of the district and its peculiar suitability for particular
		uses?
	e.	Conserving the value of buildings and encouraging the most appropriate
		use of land throughout the jurisdictional area?
4.		e proposed amendment, as nearly as possible, compatible with the zoning
	ordin	ances of nearby municipalities?
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The sto be	igning o	f this application signifies approval for the Flathead County Planning & Zoning staff on the property for routine monitoring and inspection during approval process.

	the app	blicant.	
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	K	icant Signature(s)	08::24/2021
wne	er/Appl	icant Signature(s)	Date

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Owner/Applicant Signature(s)

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8/24/2021

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